PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Effective October 1, 2004 CLAIMS AS FILED - PART I SMALL ENTITY (Column 1) (Column 2) OTHER THAN TOTAL CLAIMS TYPE [SMALL ENTITY RATE FOR FEE RATE NUMBER FILED FEE NUMBER EXTRA Basic Fee TOTAL CHARGEABLE CLAIMS 395.00 OR BASIC FEE 790.00 ninus 20= X\$ 9= INDEPENDENT CLAIMS X\$18= OR = E aunim MULTIPLE DEPENDENT CLAIM PRESENT X44= X88= OR * If the difference in column 1 is less than zero, enter "0" in column 2 +150= OR +300= TOTAL CLAIMS AS AMENDED - PART II OR: TOTAL (Column 1) OTHER THAN (Column 2) (Column 3) SMALL ENTITY CLAIMS AMENDMENT A OR SMALL ENTITY HIGHEST REMAINING NUMBER PRESENT ADDI-AFTER. PREVIOUSLY ADDI-AMENDMENT RATE **EXTRA** TIONAL RATE PAID FOR TIONAL Total FEF Minus FEE Independent X\$ 9= X\$18= Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X44: X88= +150= OR +300≥ TOTAL OR ADDIT FEE (Column 1) ADDIT, FEE (Column 2) CLAIMS (Column 3) HIGHEST REMAINING NUMBER AFTER ADDI-PRESENT AMENDMENT PREVIOUSLY ADDI-RATE. EXTRA TIONAL PAID FOR RATE TIONAL Total FEE Minus FEE Independent X\$ 9= Minus X\$18= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X44 =X88= OR +150= OR +300= TOTAL TOTAL OR ADDIT: FEE (Column 1) ADDIT. FEE (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT AFTER ADDI-PREVIOUSLY ADDI-**AMENDMENT** ÉXTRA RATE TIONAL PAID FOR RATE TIONAL Total FEE Minus FEE Independent X\$ 9= Minus X\$18= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X44=

the entry in column 1 is less than the entry in column 2, write "0" in column 3. the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter to TOTAL he "Highest Number Previously Paid For" (Total or Independent) is the highest number er found in the appropriate box in column 1.

X88= OR +150= +300= OR TOTAL

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This collection of Information is required by 37 CFR 1.16. The information is required to clearly a special collection of required to the second of the seco

If you need assistance in complaing the form, as 1-800-P TO-8160 and asiast option 2.